VACATION NUMBERS—II

CALIFORNIA STATE BOARD OF HEALTH

MONTHLY BULLETIN

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REGULAR MEETINGS

The meetings of the California State Board of Health are held regularly the first Saturday of each month, but the quarterly meetings required by law to be held at the Capitol of the State are ordinarily designated as January, April, July, and October.

By courtesy of the University of California the Food and Drug Laboratory and the Hygienic Laboratory are located in University buildings at Berkeley, California.

Address all general communications to the
SECRETARY, Sacramento, California.

JULY BULLETIN.

COMMENTS.

The Summer Campaign for Health Conservation.

The columns of the newspapers give interesting evidence of an active summer campaign for health conservation. "Swat the Fly" has become a slogan heralded from one end of the State to the other. "Clean-up days" are receiving almost as much attention. Killing mosquitoes by King Herod's method, as Woods Hutchinson styles methods of destroying the larvæ, is gaining in practice. Keeping the lid on the garbage can is appreciated to be important. Increased surveillance of markets, fruit stands, etc., is widely demanded. These are but straws pointing the current of progress in the movement.

Not only is a vigorous campaign of popular education going on, but health officials and other public officers are being stimulated to new efforts. The persistent and well planned efforts of Oroville to eradicate malaria-bearing mosquitoes is a conspicuous example of this. Oroville will soon be as free from malaria as any city in the non-malarial sections of the State. The sanitary district of Upper Lake began last year the cleaning of all streets, alleys, and vacant lots, and the weekly removal of all stable and house wastes, together with the enforcement of a regulation abolishing the open-pit toilet system in favor of the box system, with the use of wood ashes or dry earth as an absorbent and deodorizer. This was significant because it was one of the first attempts in our summer-resort districts to comprehensively deal with the small-town and country problem. This summer a number of mountain sections of the State are actively pursuing similar campaigns. Two years ago Berkeley began the pioneer anti-fly campaign in California; to-day the secretary of the chamber of commerce says: "The expenditure of a few hundred dollars in its anti-fly campaign has proved one of the best investments ever made by the municipality." The important feature of this campaign was that the municipal authorities began by rigidly applying their ordinances to their own public property and the manure bins of the fire-houses.

Pasadena began last year to establish comfort stations, following a plan for providing such facilities for every portion of the city; this summer Long Beach is taking similar action. This is one of the important public needs in all of our cities. Crusades against unsanitary methods of handling bread (the "stovewood style of toting bread"); the banishment of the common drinking cup; the prevention of serving "come backs" in restaurants (service of left-over food from the previous day); special protection of water supplies; the sanitary handling of ice; these and innumerable other special problems are being vigorously attacked by local communities throughout the State.

It is unfortunate that our reports of morbidity have been and are still too incomplete to permit any trustworthy showing of the influence of these measures on the health of the State. But this influence is at work nevertheless; it is only that we are slow in devising accurate ways of

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It is unfortunate that our reports of morbidity have been and are still too incomplete to permit any trustworthy showing of the influence of these measures on the health of the State. But this influence is at work nevertheless; it is only that we are slow in devising accurate ways of

measuring it. Just as the man who begins to sleep out of doors says as he pounds himself on his chest, "I feel a hundred per cent better," without being able to describe just how he is better, so the public is coming to realize that it pays to clean up and enforce sanitation regulations, even though we have not yet established a standard of measurement for the benefits resulting therefrom.

* * * *

California and the Cholera Situation. It would undoubtedly be a good investment for California to apply the "fire-drill" system to her public health control. Discipline made dependable through frequent drills based on hypothetical fires has saved many a life in times of the real emergency. Similarly, the sham battles of the militia and the regular army are considered well worth the cost. It is even more important that this principle should be applied to the war-game with disease, since all the fighting forces are untrained militia with only here and there a trained officer. The expense of printing and distributing brief well-worded pamphlets for boards of health, the salaries of instruction nurses, and the many other expenditures incident to developing community coöperation in fighting disease are sound investments and should be extended and systematized.

Cholera has become such a rare disease that the present generation of Californians know nothing of it. The possibility of the disease appearing here seems remote, but this is not the case. Since cholera appeared in Russia and Italy in 1910 there have come to our state from the infected areas 2,200 immigrants. It is theoretically possible that any one of these might have been a cholera "carrier" or a patient who escaped the vigilance of the health inspectors both in Europe and at the port of entry in America. To safeguard our state as far as possible, each of these immigrants has been under surveillance from the time he planned to leave his native country. The following letter is sent out from this office as soon as he leaves the quarantine port in the United States en route for California:

----------,
Health Officer,
----------, California.

DEAR DOCTOR: I have to-day received word from the immigration authorities that an immigrant named ----------, from ----------, is en route to California, having given the following as his destination: ---------- ----------. This locality is within your jurisdiction.

The State Board of Health, in coöperation with the United States Public Health and Marine Hospital Service, is doing everything possible to safeguard the State from the importation of cholera. This immigrant was held at the port of departure in the above named country for five days, and has been under observation on shipboard, again being inspected at the immigration port in this country. Notwithstanding these precautions, there is a possibility that some cholera-carrier may reach his final destination in this state. Consequently, it is desired that you inform yourself of the arrival of this immigrant, and that you arrange to be promptly notified if he develops any illness. It is also desirable that you request physicians in your jurisdiction to notify you promptly of any illness suggestive of cholera which may occur among residents in the vicinity of this immigrant's residence or place of employment.

Should a possible case of cholera develop within your jurisdiction, you are requested to promptly notify the State Board of Health, in order that we may send to your aid an expert from our laboratory to thoroughly investigate the matter.

Very truly yours,

(Signed) WILLIAM F. SNOW, M.D.
Secretary California State Board of Health.

But suppose all these precautions fail and one of these immigrants eliminating cholera "germs" with his bowel discharges, reaches an

inland town in California, and gets a job on some construction work with camps on the banks of a city's water supply. The construction company's toilets are built over the stream, and these cholera "germs" find in this arrangement their opportunity to transfer themselves from this man who has won his personal battle with them to many susceptible victims in the city. This is one of the very possible ways in which the old world epidemic of cholera may at any moment become the source of one or more foci of the disease on this western coast of the New World.

And if this supposition should come true, then what? How many of our citizens know what to expect of their health officers and what is expected of themselves in the control of the disease and the prevention of panic? The first great world epidemic of cholera recorded occurred from 1817-1823; the second appeared in 1826 and lasted till 1837; the third appeared in 1846 and continued till 1862; the fourth began in 1864 and lasted till 1875; the fifth began in 1883 and lasted thirteen years in spite of the fact that the "germ" causing the disease was known all of this time; the sixth began in 1902 and lasted till 1906; the seventh began in 1910 and will last—how long? Probably the turning point in the battle of the nations against cholera was reached in the Hamburg outbreak in 1892, when the disease within the space of ten days attacked over 17,000 in a population of 600,000, killing 50 per cent of them, and extended its attacks to 269 other places in Germany before the defensive forces of the country could be marshaled for the battle. Within nine weeks after the intelligent direction of the fight began, the disease was practically driven out of the empire. In contrast to this victory the disease continued to rage in European Russia, causing the death of over 800,000. In 1894 cholera renewed its attack on Germany, and entered 157 towns, but the people and their officers were fully trained for the battle and only 490 persons died before it was again driven out. Since that date it has been unable to get past the closely guarded ports of entry of Germany, France, and England.

Fortunately, cholera has not succeeded in gaining a foothold in the United States since 1873, when it appeared in the Mississippi Valley, and caused serious panics and grave anxiety for the success of the Centennial Exposition which was in course of preparation at Philadelphia. In spite of the fact that during the past ten years the prevalence of cholera in Japan, China and the Philippines has seriously threatened the Pacific coast through the increasing transpacific travel, California has not had any cases of cholera since 1850. It is probable that vigorous measures at our ports of entry will protect us, but cholera is a subtle enemy and it behooves us to organize a health militia and hold ourselves in readiness.

Since June 13, 1911, the surgeon general reports twenty-five cases of cholera which have developed at sea or after arrival at the New York port of quarantine. Of this number three have escaped detection until after release for entrance to this country. Two of these were held in detention from June 20th to 27th. When released one went to Brooklyn, where she was discovered July 2d, and died July 4th; the other went to Auburn, N. Y., developing the disease June 30th and dying July 1st. The third man was a quarantine employee who left the station after having served as a guard over supposedly well passengers. He developed the disease June 13th on Staten Island, and died July 14th. The fourth case of cholera to occur within the lines of our quarantine defense has

just been reported from Boston. The city health officer reports the death (July 20th) from cholera of a woman who had taken into her home as lodgers two sailors from the crew of a vessel arriving from an Italian port. The sailors were also taken ill, but disappeared and have thus far not been located.

Under date of July 19th, the following order was issued by the United States Government:

CHOLERA-BACILLUS CARRIERS.

(1911. Department Circular No. 47, Bureau of P. H. and M. H. S.)

TREASURY DEPARTMENT,
OFFICE OF THE SECRETARY,
WASHINGTON, July 19, 1911.

To National, State, and local quarantine officers, collectors of customs, shipowners and agents, and others concerned:

In accordance with the act of Congress approved February 15, 1893, and to further prevent the entrance of cholera into the United States, the following regulation, in addition to those contained in Quarantine Regulations of the Treasury Department issued October 20, 1910, and in Department Circular No. 45, July 6, 1911, is hereby promulgated, and shall remain in force until otherwise ordered:

All steerage passengers arriving at ports in the United States from ports or places infected with cholera shall be subjected to bacteriological examination and shall not be admitted to entry until it has been determined by said examination that they are not cholera-bacillus carriers.

FRANKLIN MACVEAGH, Secretary.

This order covers the greatest factor in the control of cholera. If a focus should be developed in California it will be essential to examine the bowel-discharges of every individual in the community, who can not be absolutely excluded as a carrier by other information. Equipped with the information thus obtained the health officer can proceed with definite administrative measures directed intelligently against the enemy. If the public understands the necessity for such a measure and is prepared to coöperate with the health officer when the real emergency arises there will be no alarm and only small loss of life before the threatened epidemic is fully under control.

* * * *

The Schools and the New Vaccination Law. California has a new vaccination law. It is a lonely waif. Nobody really likes it—the doctors say it is a distinct step backward; the anti-vaccinationists say it is only a half-step forward; the uninformed public considers it an unmitigated nuisance; and the health officials look suspiciously on it as a weakling which will be of little use in their battle against smallpox. The teachers befriended it because it relieves the schools of the serious friction resulting from the old-law discrimination between the public and the private school. The State Board of Health and the Antivaccination League agreed to endorse it as a fair compromise between their divergent points of view. And now the question is being asked, "Just what is this law?"

When Johnny Jones enters school this fall his teacher will say: "Johnny, have you your certificate of vaccination with you?" And Johnny hands over his certificate showing that he has been successfully vaccinated within the past seven years of his young life; and thereupon his troubles with the vaccination law cease. Or, Johnny fails to hand over this certificate, whereupon his troubles begin. For Johnny must then be vaccinated or present a bona fide statement from his doctor that he is temporarily not in condition to be vaccinated, or convince his

parents that they must go on written record as being conscientiously opposed to vaccination. If he succeeds in securing one of these "testimonials" he will be permitted to remain in school as long as smallpox stays out of the school district. His "temporarily-not-in-condition" certificate is void as soon as he recovers from the condition specified by his doctor, and his "conscientious objection" certificate must be renewed each year. Both are void during the presence of smallpox in the district.

The administrative detail of the new law is simple. The teacher collects a certificate from every child and turns these over to the local health officer with a certified list of her enrollment. The health officer goes over these certificates and classifies them according to the three types provided. He makes such investigations as he deems necessary and returns to the teacher for return to their owners the certificates of successful vaccination. Those certificates which he keeps constitute the list of provisional attendants. Upon the appearance of smallpox in the district he will require their withdrawal from school, and, of course, compliance under the general public health act with any other regulations he may consider that the seriousness of the situation warrants.

In the September issue of the Bulletin the full text of this law and a review of the arguments for it will be printed. Time alone can show the wisdom or fallacy of its provisions. In the mean while it is the intention of the State Board of Health and the Antivaccination League to enforce it in all good faith. These two organizations have little use for each other's opinions, but they respect the integrity of their members in attempting to eliminate the deception which has attended the enforcement of the old vaccination law. An accurate knowledge of those who are not immune is the most valuable information the health officer can have at the outset of an epidemic of smallpox. The right to send their children to the public school when smallpox is not in the community is the essential demand of the opponents of vaccination. Both these needs are met by the new law.

* * * *

A Day With the Secretary's Correspondence.

Many people wonder what the secretary of a State Board of Health can find to occupy his time. The extracts printed below from a few of the letters now awaiting reply as these comments are written may suggest a point of view.

These are but types of the daily correspondence of the Secretary's office. On an average forty to fifty important letters each day are received, and must be answered with accuracy and care, if the local health officials or citizens are to be genuinely aided. Before assistance is possible many of these requests must be investigated by correspondence with local officers or by personal trips of the Secretary.

It is the policy of the State Board of Health to do nothing for a local community which it can and should do for itself, but the number of intercounty matters, and of intracounty matters which the local officials are not equipped to cope with are beyond the resources of the Board's staff. The recent legislature increased the administrative office force of the Secretary, but as yet the Board is without field men for obtaining direct information on the many problems presented to it for solution or advice.

A DAY WITH THE SECRETARY'S CORRESPONDENCE, CONTINUED.

EDITOR'S NOTE.—The following letters have been selected as illustrating one phase of the State Board of Health's work. Many of these letters will require much time in searching records or in laboratory investigation before final answers can be given. Next month extracts from the monthly reports of the "Movements of the Secretary" will be printed in illustration of another phase of the routine work of the Board:

July 20, 1911.

[Southern California City.]

Dr. W. F. Snow, Secretary State Board of Health, Sacramento, California.

DEAR DOCTOR: Inclosed you will find letter from ———, directed to the Mayor, relative to the insanitary conditions of certain canneries. The matter is respectfully referred to you for investigation and reply.

Yours very truly,

——— ———,
Acting Health Commissioner.

[Respectfully referred to California State Board of Health.]

* * *

[A Bay City.]

———, Cal., July 24, 1911.

Doctor Long, U. S. Marine Hospital Service, San Francisco, Cal.

DEAR SIR: Under instructions from the North Side Improvement Club of ——, I beg to bring to your attention the fact that persons on board ships, as well as persons on the shore, are recklessly throwing refuse, such as old clothing, furniture, dead animals, etc., into the estuary of Oakland harbor. This refuse does not float out to sea, but is driven to the Alameda shore by the current, and there becoming decayed causes a nuisance, both unsightly and dangerous to health.

The ——— Association, on account of the large area of their shipping plant, are the greatest sufferers. We know that you will take the necessary steps, as far as your jurisdiction will permit, to abate the nuisance.

I am advising the city authorities as well, but I permit myself to suggest that a word from you to them as regards people on shore would help along materially.

Thanking you in advance, I remain,

Respectfully yours,

——— ———, Secretary.

DAY LETTER.

THE WESTERN UNION TELEGRAPH COMPANY.

LOS ANGELES, CAL., July 24, 1911.

Dr. W. F. Snow, Sec'y State Board of Health, Sacramento, Cal.

Has State Board power to disinter and examine body; died here July 14; diagnosis yellow fever. Returned from Mexico six days prior death. Will Board pay undertaker's expenses, such procedure? Think it important to clear up such diagnosis. If Snow away, telephone message to Gardner for opinion. Answer promptly.

WM. LEMOYNE WILLS.

3:30 P. M.

* * *

DEAR DOCTOR: Replying to your letter relative to the epidemiology of the plague case which occurred near Lafayette, Contra Costa County, I beg leave to quote from Dr. McCoy's final report as follows:

"The patient was a boy, nativity Contra Costa County, age 7 years, name Horace Flood. He gave a clear history of having hunted squirrels on a number of days during the past month. These squirrels were chased into cracks in the earth, dragged out with a hooked wire and killed by a dog. The dead squirrels were then carried home to be fed to a captive bobcat. A few days before the boy became sick, he was bitten on the left hand by a wood rat.

On Friday, July 21st, the boy became ill with fever and chilliness. The temperature when seen by a physician on that day was 105 F. The following day a swelling was found in the right axilla, and the shoulder and surrounding areas were painful and tender. Nose bleed occurred several times.

The case when I saw it was clinically undoubtedly one of plague. Fluid drawn from the gland with a hypodermic syringe showed pest-like bacilli in smears and a pure culture of *B. pestis* was secured on media. Two guinea pigs inoculated with the aspirated fluid died on the sixth day with the usual lesions of plague. The bacteriological examination therefore confirmed the clinical diagnosis.

Dr. Leech, under whose professional care the boy was, advises me that the boy died on the 26th instant.

Anti-pest serum was used without benefit."

My preliminary report of clinical diagnosis was made pending the bacteriological examination, and was sent in as soon as I had received it from Dr. McCoy, who saw the case in consultation with Dr. Leech, the family physician.

Yours sincerely,

RUPERT BLUE,
Surgeon, in Command.

* * *

[A Northern California City.]

I want to report a case and ask your advice concerning same.

We have a county charge in the person of an ex-sea captain, who is about 68 years of age, and gives a varied and suspicious history, having lived from time to time in many different ports of the world. The case looks very much like one of leprosy, though no diagnosis has been made as yet.

I saw the case to-day with the county physician, and he wants advice from the State Board. We are not sure what the trouble really is, but the man has been isolated for safety for the present, and is under the care of Dr. ———, county physician. Will you kindly write him concerning case, as I am just starting East, and will not be here when your letter arrives.

Please excuse haste, have written hurriedly.

Yours fraternally,

——— ———.

* * *

[A San Joaquin Valley City.]

———, Cal., July 25, 1911.

Wm. F. Snow, M.D., Sacramento, Cal.

DEAR SIR: We wish to call your attention to the septic tanks, which unfortunately happen to be within a few hundred yards of our home, and which is causing us a great deal of annoyance.

The odor at times is unbearable, and we are compelled to close our windows, which is very unpleasant these warm nights.

Not only that, but since the tanks have been there we have been troubled with mosquitoes so bad that it is impossible to stay out of doors after sundown.

Hoping you will investigate the matter and see if anything can be done in regard to it, we remain,

Yours truly,

——— ———.

* * *

[A Central California City.]

I was called to ———, a little town about ten or eleven miles from here, to inspect the city and surrounding country in regard to the sanitary conditions.

I find ———, although an incorporated town, has no organized Board of Health or Health Officer. It is absolutely the most unsanitary, foul smelling, dirty place I ever saw in the United States. There is from sixteen to twenty cesspools or so-called sanitary vaults, or septic tanks, they are all flowing over. As the state law forbids pumping them, I have served notices on quite a number of them not to pump them out, and left notices for the Mayor of the town to serve on those that I did not see.

I write you for advice and instructions how to handle this little burg. They voted down the sewer bonds, but I can see no remedy to clean the place up without sewerage. Some houses have their whole back yard dug up with cesspools from ten to fourteen feet deep, and all overflowing.

I would like for you to advise me what to do in this matter. If you think it is best to send a man or come yourself to investigate this case, come to ——— or have the party whoever does come, if you send anybody, stop at ——— and we will motor down. The trouble all seems to hinge on two factions in the town, but I'm quite positive that the State Board will have to take hold of this matter. If not, the town is so dirty and filthy that we'll have some serious epidemics before long, on account of the unsanitary condition of the place.

Will you kindly reply to this as early as you can, I am,

Yours respectfully,

——— ———, County Health Officer.

* * *

[Northern California.]

At ——— is located the old sawmill, built many years before I entered the service of the Fish and Game Commission. The sawdust was run out by a V flume, and dumped along the banks, and back on a flat marsh, bordering ——— Creek. A board wall or fence was built along the bank of the stream to hold the sawdust back from the stream. The sawdust was piled up to a depth of thirty feet or more, for a distance of a thousand or fifteen hundred feet along the stream, and back for six hundred feet, the water passing through beneath and out in small streams into the creek.

Added to the sawdust there was placed over the V flume toilets for the use of the men at the box factory. A fire destroyed the fence, allowing the sawdust to fall down into the stream. The surface of this immense heap of sawdust becomes dry as soon as the snow is melted or soon after a rain. Every spring the wind blows a gale from the south, which drives the dry particles of sawdust into the old channel of the stream, thus keeping a supply which passes down, soaking with the water, and slowly filling up the pools, to a distance uncalculable, entering Shasta River and the Klamath, and so on.

The water that carries the sawdust from the mill keeps it soaked from a few inches below the surface to the ground beneath, precluding the burning of the sawdust except on the surface. The water takes with it the turpentine and sap from the sawdust, which added to the other sources, makes a black, foaming stream that has a fearful stench unfit for cattle or humans to drink.

In order to stop as much as possible the sawdust from passing down the stream the company was required by the Fish Commission to dig a ditch, diverting the stream from its old channel out along the hillside for a distance of six hundred feet, thereby putting the water into the old channel below the dump, but often the cattle break the banks and the water gets back into the stream, but none is getting away now from that source, as the ditch has been repaired and cattle turned out.

This creek flows down through ———, a part of the town of ———, where it gathers the sewer deposit of most of the town, the greater portion of which is saloons. Then come the great sawdust dumps from the immense plant at ———, covering a hundred acres, or nearly so, many feet deep. Here the toilets are over the V flumes and the mass is dumped out on the land above the creek, the water finding

its way into same along the ground beneath. When I last reported this dump, a hole through the brush and under the wall was allowing the water to wash sawdust down, but my inspection of yesterday found the place closed and no sawdust escaping, but the water (about thirty miners' inches being used) is black slime, full of turpentine, sap, etc.

As stated in former reports, the water from these sources flowing down the creek into Shasta River is polluted and is polluting Shasta River, noticeable for a distance of fifteen miles.

The only way to obviate this is for those mills to burn the sawdust and the sewerage to be dumped into tanks and sterilized. The sawdust is less in extent than in the past, but the slime is worse. I am taking this report to our district attorney, and will get his answer.

Yours respectfully,

——— ———.

* * *

[A Lower San Joaquin City.]

DEAR SIR: Under separate cover, I am sending you a set of plans for the proposed settling tanks for the city of ———, Cal.

You will notice that they are designed along circular lines, thereby using maximum economy in construction and maximum efficiency in diffusing the sewage in the tanks. You will also notice that provision has been made for cleaning out, not only the sludge, but also the scum. It is proposed to use the effluent for irrigation when desired, and when not so used, to run the sewage effluent through open jointed tile drains, laid under the surface of the ground, until it has seeped away.

The tanks will be located about three miles southwest of the city, on a 40-acre sewer farm.

The plans for the entire works have not been completed as yet, but I thought I would send these in with the request that you look them over when convenient; I would like to have the plans in such shape that they will meet with your approval, and that you will then approve them officially, if such procedure is permissible.

Very truly yours,

——— ———.

* * *

[A Sacramento Valley City.]

Will you kindly inform me as to the requirements with regard to slaughterhouses?

The local County Health Officer of this place orders me to not salt hides in the slaughterhouse; to not feed offals to hogs at all unless cooked, as they are inductive to typhoid. I am willing to do all that is required, and will conform to any reasonable request beyond actual requirements. And as I have never seen any out-of-town slaughterhouses doing these things, I am inclined to think that I am being imposed upon. To cook the offals from my killing—which amounts to only an average of one beef per day, would require me to hire an extra man at an expense of about $60 per month, and would knock the profit entirely off the business. I have a large hog yard, about one and one half acres, and have my men scatter these offals so that the hogs can and do clean them up entirely before they decompose.

As to salting hides at the slaughterhouse—they are thoroughly salted and cured, but, as you surely know, hides always smell, and smell strongly. The fresh meat comes in contact with nothing but the wagon it is hauled in, and is not left there at all, but taken immediately to the market. Please instruct me fully, and also, has the local officer any authority beyond your rules?

Yours very truly,

——— ———.

* * *

[A San Francisco Case.]

Acknowledging the citation issued by your honorable Board, directed against us April 15, 1911, we are enclosing affidavit of our manager in regard to same.

On the occasion of the inspector's first visit to us we assured him of our willingness to strictly observe the laws of the Pure Food Commission, and advised him if he saw anything on our shelves that did not comply with said laws, we would gladly remove the same.

We must acknowledge the violation in this case, and ask that you deal with us as leniently as the circumstances will permit. Assuring you of our hearty coöperation in the upholding of all pure food laws, we beg to remain,

Yours very truly,

——— ———.

* * *

[A Los Angeles Case.]

I do hereby depose and make affidavit that the labels found on toothache drops of my manufacture were put on by error by a new clerk in my employ, and none of same were sold, having been bottled a couple of days previous to your inspector's call.

Proper labels were in stock and in use at the time, and had been for several years back, however, some of the "old firm" labels remained undestroyed and my clerk happened on these.

I was not present when your inspector was doing his duty, but on my return (about an hour later), and on learning of the mislabeled drops, immediately wrote the honorable State Board of Health at Sacramento of the error and enclosed the properly worded labels which should have been used. The half dozen bottles of toothache drops were relabeled and all old labels destroyed.

Very truly,

——— ———.

[From a San Joaquin Valley City.]

Secretary of Stae Bord of helth

DEAR SIR find in closed Bill of goods that wer bought insept 15 1905 of ——— Syrup Pickle cO. which the chiley sause that the puer food in spector found that did not conferm with puer food law now this goods were maid before the puer food law past and we posable had a few botles that had neve bin sold and posible hav not sold eny for years and i hav in structed my manager to distroy all that old goods he has in store as we dont want to vilate the lawe in eny form and i hop yoy will ex plain this to yor bord and ask them to dismiss the case as we wer ignernt of the contence of the goods and and cant sea how the other people could be blamd as it wer put up be fore the food law wer past. thanking you for yor trouble and what ever expence you may be to iwill gladly pauy yours vary truly

[The above is an accurate copy, minus the address and signature.]

* * *

[Sacramento Valley Town.]

Secretary of State Board of Health.

The water works of this town are municipally owned, and the Board of Trustees is desirous of having the water furnished by these works analyzed in order to determine its fitness for general use.

It has been suggested to me that the State Board of Health would furnish an analysis or would investigate and advise how and where one can be obtained.

Can you aid me in this matter?

Respectfully,

———— ————.

* * *

[From a Bay City.]

You would greatly oblige me if you could let me have, for an indefinite period of a few months, one of the demonstration boxes I have seen, to be used as illustration of talks on hygiene. We expect to have two or three different courses on this and allied subjects at our Y. W. C. A., and perhaps there will be opportunity also for me to use it in some schools, through mothers' clubs, etc.

I would also be very glad, if possible, to be on your mailing list for the bulletins of the Board of Health.

Thanking you for your help in this matter,

Very sincerely yours,

———— ————.

* * *

[A Southern California City.]

At the present time, in a few cases, the undertakers are compelled to go to the CITY HEALTH OFFICE, also, to visit my office, which is three blocks farther north, while nearly all the undertakers' establishments are a mile or more farther south. Nearly all of the undertakers have signed a petition requesting me to appoint a member of one of the largest undertaking firms as a subregistrar. This, no doubt, would be a convenience to them; on the other hand, one firm objects very strenuously to such action on my part.

I have taken the matter up with the City Health Officer, and he says that the undertakers do a great many things that they ought not to do, and he regrets he can not have some of them arrested. I consider the gentleman they have requested me to appoint a reliable man; but in the end it is necessary for you to approve all my work and my appointments.

Do you think it advisable to appoint an undertaker to issue burial permits? An early reply will be appreciated.

Yours very truly,

————— ————,
County Recorder.

* * *

DEAR SIR: Please accept my thanks for your very kind letter of the 3d inst. in response to my letter inquiring what, if anything, had been done as to the matter of calling attention of medical practitioners to act approved April 21, 1911, for the reporting of occupational diseases.

I think every one is satisfied that the changes made in the bill for the purpose of having medical practitioners report to the State Board of Health and the latter transmit such data to the Commissioner of the Bureau of Labor Statistics will prove beneficial.

Yours, etc.,

———— ————.

* * *

MY DEAR DR. SNOW: If you have not taken up that matter of the International Congress on Hygiene and Demography with Governor Johnson, please do so. There is an active foreign demand for our preliminary announcement, and we must get it out, in French and German, as well as in English, without delay. I should hate very much to let it go with the statement that only twenty out of forty-six states have so far sent in official acceptances of the President's invitation. It would be a bad parallel to the other statement that twenty-three foreign countries (all there are that count) have sent their official acceptances to the Department of State.

* * * * * * * * *

Yours very truly,

JOHN S. FULTON, Secretary-General.

I am now engaged in compiling the California Blue Book, issue of 1911, as provided by the last session of the legislature, and in this connection would thank you kindly if you will, in your official capacity, favor me with an article of about two thousand words as an introductory bearing on your branch of the State government. I would appreciate it very much if you would let me have this article at an early date.

Thanking you in anticipation of your kind consideration, I am

Very truly yours,

FRANK C. JORDAN, Secretary of State.

* * *

[San Francisco Consulate.]

This is to request of you the favor to inform me at your convenience, whether the following names appear in your death-list:

John Marcopulos or Marcos, a Greek, supposed to have died eight months ago.

Michael Carantsas or Colontaris or Vamos, a Greek, about seventy years old, supposed to have died six months ago.

Thanking you in advance for any information that you may desire to furnish me with, regarding the death of these men, I am,

Respectfully yours,

RICHARD DE FONTANA, Consul of Greece.

DEPARTMENT REPORTS.

REPORT OF BUREAU OF VITAL STATISTICS FOR JUNE.

GEORGE D. LESLIE, Statistician.

State Totals and Annual Rates.—The following table shows for California as a whole the birth, death, and marriage totals for the current and preceding months in comparison with those for the corresponding months of last year, as well as the annual rates per 1,000 population represented by the totals for the current and preceding months. The rates are based on an estimated midyear population of 2,488,256 for California in 1911, the estimate having been made by the Census Bureau method with slight modifications.

Birth, Death and Marriage Totals, with Annual Rates per 1,000 Population for Current and Preceding Months, for California: June.

MONTH.	MONTHLY TOTAL.		Annual Rate per 1,000 Population · 1911.
	1911.	1910.	
June—			
Births	2,986	2,746	14.6
Deaths	2,604	2,630	12.7
Marriages	2,976	2,636	14.5
May—			
Births	2,894	2,693	13.7
Deaths	2,888	2,727	13.7
Marriages	2,087	1,858	9.9

The death total for June, 1911, is somewhat less than that for June, 1910, but the birth and marriage totals for June, as for the preceding five months of 1911, are greater than the corresponding totals for the same months last year.

In fact, the June marriage total for 1911 is by far the highest monthly total reported under the registration law of 1905, the several June totals being as follows: 1911, 2,976; 1910, 2,636; 1909, 2,511; 1908, 2,251; 1907, 2,366, and 1906, 2,342.

County Totals.—The following table shows the monthly birth, death, and marriage totals for the principal counties of the State, the list being limited to counties having a population of at least 25,000 according to the Federal Census of 1910. Totals are also shown for San Francisco

and the other bay counties (Alameda, Contra Costa, Marin, and San Mateo), as well as for Los Angeles and Orange counties together:

Birth, Death and Marriage Totals, for Principal Counties: June.

County.	June, 1911.		
	Births.	Deaths.	Marriages.
California	2,986	2,604	2,976
Counties of more than 25,000 population (1910):			
Alameda	334	255	311
Butte	30	18	20
Contra Costa	42	26	17
Fresno	112	73	91
Humboldt	34	27	28
Kern	35	39	32
Los Angeles	731	570	717
Marin	22	18	90
Orange	47	34	117
Riverside	67	38	35
Sacramento	115	97	106
San Bernardino	63	87	57
San Diego	61	91	107
San Francisco	592	502	523
San Joaquin	42	70	73
San Mateo	42	31	38
Santa Barbara	37	19	29
Santa Clara	115	109	117
Santa Cruz	30	23	23
Solano	24	29	19
Sonoma	41	39	52
Tulare	37	31	33
Selected groups:			
San Francisco and other bay counties	1,032	832	979
Los Angeles and Orange counties	778	604	834

City Totals.—The table below gives the birth and death totals for the principal freeholders' charter cities, the list including all chartered cities with a census population of at least 15,000 in 1910. Totals are given likewise for San Francisco and the transbay cities (Alameda, Berkeley, and Oakland), as well as for Los Angeles and neighboring chartered cities (Long Beach, Pasadena, Pomona, and Santa Monica):

Birth and Death Totals, for Principal Cities: June.

City.	June, 1911.	
	Births.	Deaths.
Freeholders' charter cities	1,908	1,565
Cities of more than 15,000 population (1910):		
Alameda	22	19
Berkeley	93	31
Fresno	53	32
Long Beach	21	22
Los Angeles	515	373
Oakland	191	157
Pasadena	40	24
Riverside	48	25
Sacramento	80	61
San Diego	40	74
San Francisco	592	502
San Jose	53	37
Stockton	16	39
Selected groups:		
San Francisco and transbay cities	898	709
Los Angeles and neighboring cities	592	438

Causes of Death.—The following table shows the classification of deaths in California for the current month, in comparison with the preceding month:

Deaths from Certain Principal Causes, with Proportion per 1,000 Total Deaths for Current and Preceding Month, for California: June.

Cause of Death.	Deaths: June.	Proportion per 1,000.	
		June.	May.
All causes	2,604	1,000.0	1,000.0
Typhoid fever	38	14.6	12.8
Malarial fever	5	1.9	2.8
Measles	7	2.7	4.5
Scarlet fever	11	4.2	3.5
Whooping-cough	20	7.7	6.2
Diphtheria and croup	7	2.7	3.1
Influenza	6	2.3	1.7
Other epidemic diseases	17	6.5	6.2
Tuberculosis of lungs	320	122.9	147.8
Tuberculosis of other organs	75	28.8	30.5
Cancer	158	60.7	67.2
Other general diseases	111	42.6	45.0
Meningitis	41	15.8	11.8
Other diseases of nervous system	214	82.2	89.7
Diseases of circulatory system	376	144.4	161.0
Pneumonia and broncho-pneumonia	149	57.2	64.8
Other diseases of respiratory system	60	23.0	22.5
Diarrhea and enteritis, under 2 years	88	33.8	18.0
Diarrhea and enteritis, 2 years and over	42	16.1	6.6
Other diseases of digestive system	147	56.5	47.1
Bright's disease and nephritis	156	59.9	68.9
Childbirth	35	13.4	11.4
Diseases of early infancy	91	34.9	32.2
Suicide	72	27.7	17.7
Other violence	232	89.1	77.2
All other causes	126	48.4	39.8

In June there were 395 deaths, or 15.2 per cent of all, from various forms of tuberculosis, and 376, or 14.4 per cent, from diseases of the circulatory system, tuberculosis thus leading heart disease somewhat.

Other notable causes of death were: Violence, 304; diseases of the digestive system, 277; diseases of the nervous system, 255; diseases of the respiratory system, 209; cancer, 158; Bright's disease and nephritis, 156, and epidemic diseases, 111.

The deaths from epidemic diseases were as follows: Typhoid fever, 38; whooping-cough, 20; scarlet fever, 11; measles and diphtheria (and croup) each, 7, and all other epidemic diseases, 30.

The deaths from the three leading epidemic diseases reported for May were distributed by counties as follows:

Typhoid Fever.		Whooping-cough.		Scarlet Fever.	
Alameda	2	Alameda	1	Contra Costa	6
Contra Costa	2	Butte	2	Kern	1
Fresno	4	Colusa	1	Los Angeles	2
Humboldt	1	Kern	1	San Francisco	1
Imperial	2	Los Angeles	2	Sonoma	1
Kern	2	Marin	1		
Los Angeles	5	Merced	1	Total	11
Mendocino	1	Orange	2		
Monterey	1	Riverside	1		
Napa	1	San Francisco	4		
Orange	1	San Joaquin	1		
Sacramento	2	Solano	1		
San Bernardino	4	Tulare	1		
San Francisco	6	Yolo	1		
Santa Cruz	1				
Stanislaus	2	Total	20		
Tehama	1				
Total	38				

Geographic Divisions.—Data for geographic divisions, including the metropolitan area, or "Greater San Francisco," are as follows:

Deaths from Main Classes of Diseases, for Geographic Divisions: June.

Geographic Division.	Deaths: June.										
	All Causes	Epidemic Diseases	Tuberculosis (All Forms)	Cancer	Diseases of Nervous System	Diseases of Circulatory System	Diseases of Respiratory System	Diseases of Digestive System	Bright's Disease and Nephritis	Violence	All Other Causes
The State	2,604	111	395	158	255	376	209	277	156	304	363
Northern California	274	16	35	23	33	38	17	24	17	34	37
Coast counties	146	7	18	12	20	24	9	15	11	13	17
Interior counties	128	9	17	11	13	14	8	9	6	21	20
Central California	1,461	69	191	95	121	219	139	161	85	173	208
San Francisco	502	18	60	39	28	96	65	52	22	42	80
Other bay counties	330	19	39	20	35	43	30	33	21	44	46
Coast counties	173	4	32	14	16	28	15	16	11	16	21
Interior counties	456	28	60	22	42	52	29	60	31	71	61
Southern California	869	26	169	40	101	119	53	92	54	97	118
Los Angeles	570	12	105	32	61	82	40	57	42	56	83
Other counties	299	14	64	8	40	37	13	35	12	41	35
Northern and Central California	1,725	85	226	118	154	257	156	185	102	207	245
Metropolitan area	832	37	99	59	63	139	95	85	43	86	126
Rural counties	903	48	127	59	91	118	61	100	59	121	119

Communicable Diseases—Report for June, 1911.

Disease.	Cases.	Places.
Typhoid fever	73	11
Measles	322	12
Scarlet fever	150	16
Whooping cough	78	7
Diphtheria	48	10
Smallpox	3	2
Malaria	19	3
Hookworm	14	1*
Filariasis	1	1*

* Found in San Francisco as result of investigations of Bureau of Tropical Diseases, Department of Health.

REPORT OF THE PURE FOOD AND DRUG LABORATORY.

PROFESSOR M. E. JAFFA, Director.

Owing to the necessity for the members of the Board to attend the Conference of State and Provincial Boards of Health in Los Angeles on July 1st, the regular meeting date, no pure food hearings were scheduled for July and the regular report of the work of this department will be included in the report for August.

REPORT OF THE STATE HYGIENIC LABORATORY FOR JUNE.

WILBUR A. SAWYER, M.D., Director.

As a part of the exhibit of the State Board of Health the Hygienic Laboratory maintained a public display in Los Angeles during the annual session of the American Medical Association from June 27th to 30th. The mailing outfits and literature of the laboratory, a wall map showing the distribution of rabies in California, and hygienic devices, such as extemporized drinking cups, pocket sputum cups, paper handkerchiefs, and paper towels, were displayed. Public health officials from other states were interested in the recently devised bacteriological instruction outfit for teachers. This outfit shows among other things, germs growing in the tracks of flies and in finger prints, bacteria from dirty milk and from dust, and also a great variety of bacteria from a public drinking cup. A description of this outfit was published in the May Bulletin of the State Board of Health.

The Director of the Laboratory visited several towns in southern California after attending public health meetings during the session of the Medical Association. At Riverside he had the privilege of speaking before a union meeting of the church brotherhoods of that city. The gathering was addressed by the city and county health officers, Dr. Thomas R. Griffith and Dr. George E. Tucker, and resulted in the organization of a league for the support of public health measures.

The tabulated report of the routine examinations of the laboratory is appended.

Summary of Examinations made in the California State Hygienic Laboratory during the month of June, 1911.

	Positive.	Negative.	Total.
Main Laboratory at Berkeley:			
Condition suspected:			
Diphtheria	7	29	36
Malaria	--	--	--
Rabies	3	2	5
Tuberculosis	5	16	21
Typhoid	5	10	15
Water pollution	--	--	--
Anthrax	--	1	1
Miscellaneous	--	2	2
			80
Los Angeles Branch Laboratory:			
Condition suspected:			
Diphtheria	1	3	4
Tuberculosis	--	1	1
			5
Total number examinations			85

REPORT OF THE BUREAU OF PUBLIC HEALTH INFORMATION.

IMPORTANT ANNOUNCEMENT.

The League of California Municipalities will hold its fourteenth annual convention in Santa Barbara, October 23d to 28th, inclusive, in conjunction with the annual conference of the State and Local Boards of Health.

The officers of the league are planning an important program, and have arranged for an extensive exhibit of municipal machinery, supplies, and health appliances. Every one interested in civic planning and improvement, whether a member of these conferences or not, should make an effort to attend these meetings.

The issues of Pacific Municipalities give the details for this convention, and the future numbers of this Bulletin will refer again to it. Any letters addressed to the State Board of Health or to the editors (H. A. Mason and Wm. J. Locke), of the Pacific Municipalities, Pacific Bldg., San Francisco, will be promptly answered.

Remember the date—October 23-28th.

LIST OF COUNTY HEALTH OFFICERS.

County.	*Health Officer.*	*Address.*
Alameda	Dr. C. L. McKown	Niles
Alpine*	County Recorder Frank Smith	Markleeville
Amador	Dr. E. E. Endicott	Jackson
Butte	Dr. L. Q. Thompson	Gridley
Calaveras	Dr. E. W. Weirich	Angels Camp
Colusa	Dr. C. A. Poage	Colusa
Contra Costa	Dr. F. S. Gregory	Black Diamond
Del Norte*	County Recorder N. G. McVay	Crescent City
El Dorado	Dr. W. S. Hickman	Georgetown
Fresno	Dr. W. T. Burks	Fresno
Glenn	Dr. J. A. Randolph	Willows
Humboldt	Dr. E. H. Bryan	Eureka
Imperial	Dr. Virgil McCoombs	Imperial
Inyo	Dr. I. J. Woodin	Independence
Kern	Dr. G. M. Bumgarner	Bakersfield
Kings	Dr. Ralph Motherol	Hanford
Lake	Dr. W. E. Upton	Kelseyville
Lassen	Dr. D. E. Mason	Bieber
Los Angeles	Dr. F. O. Sawyer	Los Angeles
Madera	Dr. Mary R. Butin	Madera
Marin	Dr. J. H. Kuser	San Rafael
Mariposa	Dr. F. L. Wright	Mariposa
Mendocino	Dr. J. Liftchild	Ukiah
Merced	Dr. C. H. Castle	Merced
Modoc	Dr. John Stile	Alturas
Mono*	County Recorder Geo. Delury	Bridgeport
Monterey	Dr. Garth Parker	Salinas
Napa	Dr. Adolph J. Kahn (County Physician)	Napa
Nevada	Dr. Carl P. Jones	Grass Valley
Orange	Dr. C. D. Ball	Santa Ana
Placer	Dr. G. H. Fay	Auburn
Plumas	Dr. F. D. Walsh	Quincy
Riverside	Dr. George E. Tucker	Riverside
Sacramento	Dr. Hugh Beattie	Elk Grove
San Benito	Dr. R. G. Curtis	Hollister
San Bernardino	Dr. Philip M. Savage	San Bernardino
San Diego	Dr. Nathan Hunt	San Diego
San Francisco	Dr. W. F. McNutt, Jr.	San Francisco
San Joaquin	Dr. Wm. Friedberger	Stockton
San Luis Obispo	Dr. H. M. Cox	San Luis Obispo
San Mateo	Dr. W. G. Beattie	Colma
Santa Barbara	Dr. J. C. Bainbridge	Santa Barbara
Santa Clara	Dr. William Simpson	San Jose
Santa Cruz	Dr. W. R. Congdon	Santa Cruz
Shasta	Dr. F. Stabel	Redding
Sierra	Dr. R. B. Davey	Downieville
Siskiyou	Dr. F. J. McNulty (County Physician)	Yreka
Solano	Dr. S. G. Bransford	Suisun
Sonoma	Dr. S. S. Bogle	Santa Rosa
Stanislaus	Dr. F. R. De Lappe	Modesto
Sutter	Dr. J. McFadyen	Yuba City
Tehama	Dr. J. S. Cameron	Red Bluff
Trinity	Dr. D. B. Fields	Weaverville
Tulare	Dr. M. E. Pettit	Visalia
Tuolumne	Dr. Wm. Lyman Hood	Sonora
Ventura	Dr. A. A. Maulhardt	Oxnard
Yolo	Dr. W. J. Blevins	Woodland
Yuba	Dr. J. H. Barr	Marysville

*This county has not been able to arrange with any physician to serve as county health officer.

PARTIAL LIST OF CITY HEALTH OFFICERS.

Alameda	Dr. L. W. Stidham
Alhambra	Dr. F. E. Corey
Alturas	Dr. John Stile
Anaheim	Dr. J. L. Beebe
Anderson	Dr. J. H. Soothill
Antioch	E. C. Worrill
Auburn	Dr. R. F. Rooney
Azusa	Dr. S. A. Ellis
Berkeley	Dr. J. J. Benton
Biggs	Dr. B. Caldwell
Black Diamond	Dr. F. S. Gregory
Bakersfield	Dr. G. M. Bumgarner
Calexico	Dr. H. G. Richter
Chico	G. H. Taylor
Chino	Dr. P. M. Savage
Coalinga	Dr. H. S. Warren
Colton	Dr. J. A. Champion
Colusa	Dr. W. T. Rathbun
Corona	W. H. Chapman
Coronado	Dr. Raffaele Lorini
Cottonwood	Dr. A. B. Gilliand
Davis	Dr. W. E. Bates
Doris	Dr. A. A. Atkinson
Dixon	Dr. R. L. Rierson
Dunsmuir	Dr. E. J. Cornish
East San Jose	Dr. W. A. Low
Elsinore	Dr. Hugh Walker
Escondido	Dr. David Crise
Etna	Dr. W. H. Haines
Eureka	Dr. W. L. Perrott
Fairfield	Dr. S. G. Bransford
Ferndale	Dr. L. Michael
Fort Bragg	Dr. L. C. Gregory
Fort Jones	Thos. Bransom
Fresno	Dr. Geo. H. Aiken
Gilroy	Dr. Jonas Clark
Glendale	R. E. Chase
Grass Valley	Dr. C. P. Jones
Gridley	Dr. L. L. Thompson
Hanford	Dr. R. W. Musgrave
Hayward	Dr. F. W. Browning
Healdsburg	Dr. O. C. Hueb
Hermosa Beach	H. Vetter
Hollywood	E. O. Palmer
Huntington Park	Dr. W. Thompson
Kernville	Mr. J. W. Sumner
Lakeport	Dr. Jabez Banks
Lincoln	Dr. G. W. Davis
Lindsay	Dr. Walter W. Tourtillott
Livermore	Dr. H. G. McGill
Lodi	Dr. F. W. Colman
Long Beach	Dr. W. H. Newman
Los Angeles	Dr. L. M. Powers
Los Gatos	Dr. C. K. Small
Madera	Dr. Mary R. Butin
Maricopa	Mr. Thad Cheeney
Martinez	Dr. E. E. Brown
McCloud	Dr. R. T. Legge
McKittrick	Mr. G. M. Chitwood
Merced	Dr. C. H. Castle
Mill Valley	Capt. M. Staples
Modesto	Dr. J. J. Knowlton
Mojave	Mr. A. Smith
Monrovia	Dr. R. D. Adams
Monterey	J. E. Freeman
Morgan Hill	Dr. D. W. Watt
Mountain View	Dr. Philo Hull
Napa	J. D. Treadway
National City	Dr. Theo. F. Johnson
Nevada City	Hugh Murchie
Newman	Dr. H. V. Armistead
Oakland	Dr. E. N. Ewer
Ontario	Dr. C. S. Orr
Orange	Dr. F. L. Champline
Oroville	Dr. W. F. Gates
Oxnard	Dr. Ralph W. Avery
Pacific Grove	Dr. H. N. Yates
Palo Alto	Hubert O. Jenkins
Pasadena	Dr. Stanley P. Black
Petaluma	Dr. J. M. Proctor
Placerville	Mr. P. J. Hall
Pleasanton	Dr. S. J. Wells
Pomona	Dr. T. J. Wilson
Piedmont	Geo. T. Burtchael
Randsburg	Mr. E. B. McGinnes
Redding	L. D. Poole
Redlands	Dr. J. M. Wheat
Redondo Beach	Dr. D. R. Hancock
Redwood	Dr. J. L. Ross
Richmond	Dr. Chas. R. Blake
Riverside	Dr. Thos. R. Griffith
Rocklin	Dr. S. P. Rugg
Sacramento	Dr. Wm. K. Lindsay
Salinas	S. A. McCollum
San Bernardino	Dr. J. G. Ham
San Diego	Dr. F. H. Mead
San Francisco	Dr. W. F. McNutt, Jr.
San Jose	Dr. H. C. Brown
San Jacinto	Charles Long
San Rafael	Dr. W. F. Jones
Santa Ana	Dr. J. I. Clark
Santa Barbara	Dr. D. A. Conrad
Santa Cruz	Dr. H. E. Piper
Santa Monica	Dr. W. H. Parker
Santa Rosa	Dr. Jackson Temple, Jr.
Sawtelle	Dr. A. B. Hromadka
Sisson	Dr. L. Gouzuet
South Pasadena	Dr. C. A. Whiting
Stockton	Dr. S. W. R. Langdon
Taft	Mr. J. W. Bursell
Tracy	Dr. J. G. Murrell
Turlock	Dr. E. L. Clough
Vacaville	Mr. A. P. Finan
Vallejo	Dr. F. T. Bond
Watsonville	Dr. F. H. Koepke
Woodland	W. D. Clary
Whittier	Dr. W. H. Stokes
Yreka	Dr. A. J. Collar

THE CALIFORNIA STATE BOARD OF HEALTH BULLETIN WILL BE SENT FREE TO ANY CITIZEN OF THE STATE ON REQUEST.